

**INFORMATIONAL LETTER NO. 2093-MC-FFS**

**DATE:** January 17, 2020

**TO:** All Iowa Medicaid Providers

**APPLIES TO:** Managed Care (MC), Fee-for-Service (FFS)

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** Final Statewide Transition Plan (STP) for Home- and Community-Based Services (HCBS) Settings

**EFFECTIVE:** Immediately

In March 2014, the Centers for Medicare and Medicaid Services (CMS) issued regulations that define the settings in which it is permissible for states to pay for Medicaid HCBS.

The purpose of these regulations are to ensure that individuals receive Medicaid HCBS in settings that are integrated in and support full access to the greater community. This includes opportunities to seek employment and work in competitive and integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree as individuals who do not receive HCBS.

On December 19, 2019, the IME submitted a final draft STP to CMS. The final draft STP is available on the [DHS website](#)<sup>1</sup>. The final STP will be posted on the DHS website when approved by CMS.

The STP covers the 1915(i) State Plan HCBS programs known as HCBS Habilitation Services and all seven 1915(c) HCBS Waivers, which includes the Intellectual Disability, Brain Injury, Health and Disability, Physical Disability, Elderly, AIDS/HIV and Children's Mental Health Waivers. The STP covers all HCBS services whether provided through FFS or through MC, including any additional HCBS provided as "value-added" or 1915(b)(3) services through a Managed Care Organization (MCO).

---

<sup>1</sup> <https://dhs.iowa.gov/sites/default/files/FINAL%20STP%2012.19.19.pdf>